

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**CARLY FOR PRESIDENT**

**A. Full Name (Last, First, Middle Initial)**

**MS. LINDA JELACICH**

Mailing Address 4747 WALNUT AVE.

City	State	Zip Code
HUGHSON	CA	95326-9769

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
N/A

Occupation  
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17.208022**

Date of Receipt

**06 / 05 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

**B. Full Name (Last, First, Middle Initial)**

**MICHAEL O'BOYLE**

Mailing Address 210 SLOAN ROAD

City	State	Zip Code
LYMAN	SC	29365-9505

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF

Occupation  
ORTHOPAEDIC TRAUMA SURGEON

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17.208171**

Date of Receipt

**06 / 05 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

**C. Full Name (Last, First, Middle Initial)**

**MR JOHN PAULSON**

Mailing Address 1251 AVENUE OF THE AMERICAS  
FLOOR 50

City	State	Zip Code
NEW YORK	NY	10020-1122

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PAULSON AND COMPANY INC

Occupation  
PRESIDENT PORTFOLIO MANAGER AND DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.207996**

Date of Receipt

**06 / 05 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**Subtotal Of Receipts This Page (optional)**.....

3050.00

**Total This Period (last page this line number only)**.....